



CITY OF LINCOLN
NEBRASKA

Lincoln Police Department
Thomas K. Casady, Chief of Police
575 South 10th Street
Lincoln, Nebraska 68508

402-441-7204
fax: 402-441-8492

LINCOLN
The Community of Opportunity

MAYOR COLEEN J. SENG

www.ci.lincoln.ne.us

March 9, 2004

Mayor Seng and City Council
City of Lincoln
City County Building
Lincoln, NE

Mayor Seng and Members of the City Council:

An investigation has been made regarding the application of Four Suns Restaurant, 3239 South 13th Street requesting a class I liquor license.

Pimpa Mills, owner has requested that she be approved as the manager of the liquor license.

Background information on the applicant is as follows:

Pimpa Mills was born in Phagreen Brurry, Thailand. She opened Four Suns Restaurant in 1999. Prior to 1999 Mrs. Mills was a homemaker.

For Councils information a special permit has not yet been obtained to allow alcohol sales at this location.

If this application is approved, it should be with the understanding that it conforms to all the rules and regulations of Lincoln, Lancaster County and the State of Nebraska.

THOMAS K. CASADY, Chief of Police



A nationally accredited law enforcement agency



Liquor License Investigation

Business (DBA) Four Saws

☒ Manager ☒ Owner Other _____

Name: Pimpa Mills

US Citizen ? ☒ Yes No

Has applicant ever been cited for liquor law violations ? ☒ No Yes
Explain _____

Does applicant have an interest in another liquor license ? ☒ No Yes
Explain _____

Is spouse qualified to hold a license ? Yes No ☒ N/A

How is applicant if not an owner to be paid ? Salary Hourly

How many hours will applicant be at the establishment ? 100 +

Any other employment ? ☒ No Yes, explain _____

Any previous experience with a liquor license? Yes ☒ No

Any criminal convictions ? ☒ No Yes
Comments _____

Is applicant a property owner in Lincoln ? ☒ Yes No

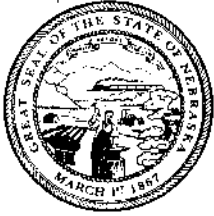
Is applicant involved in any civil litigation ? ☒ No Yes
Comments _____

(☒) Photo (☒) Records Check (☒) References

Comments _____

Interview Date 3 / 9 / 04

STATE OF NEBRASKA



Mike Johanns
Governor February 13, 2004

FILED
CITY CLERK'S OFFICE

'04 FEB 17 PM 3:55

CITY OF LINCOLN
NEBRASKA

NEBRASKA LIQUOR CONTROL COMMISSION

Hobert B. Rupe

Executive Director

301 Centennial Mall South, 5th Floor

P.O. Box 95046

Lincoln, Nebraska 68509-5046

Phone (402) 471-2571

Fax (402) 471-2814

TRS USER 800 833-7352 (TTY)

web address: <http://www.nol.org/home/NLCC/>

City Clerk
County/City Bldg
555 South 10th Street
Lincoln NE 68508

Dear Local Governing Body:

Attached is the form to be used on all retail liquor license applications. Local clerks must collect proper license fees and occupation tax per ordinance, if any, before delivering the license at time of issuance.

TWO KEY TIME FRAMES TO KEEP IN MIND ARE:

- 1) You have 45 days to conduct a hearing after the date of receipt of the notice from this Commission (§53-134). You may choose **NOT** to make a recommendation of approval or denial to our Commission.

PER §53-133, THE LIQUOR CONTROL COMMISSION SHALL SET FOR HEARING ANY APPLICATION WHEREIN:

- 1) There is a recommendation of denial from the local governing body.
- 2) A citizens protest; or
- 3) Statutory problems that the Commission discovers.

PLEASE NOTE...A LICENSEE MUST BE "PROPERLY" LICENSED IN ORDER TO PURCHASE FROM WHOLESALERS; AND, A LICENSE IS EFFECTIVE:

- 1) Upon payment of the license fees;
- 2) Physical possession of the license;
- 3) Effective date on the license.

Sincerely,

NEBRASKA LIQUOR CONTROL COMMISSION

Michelle Porter

Michelle Porter
Licensing Division

Enclosures

Rhonda R. Flower
Commissioner

Bob Logsdon
Chairman

R.L. (Dick) Coyne
Commissioner

An Equal Opportunity/Affirmative Action Employer

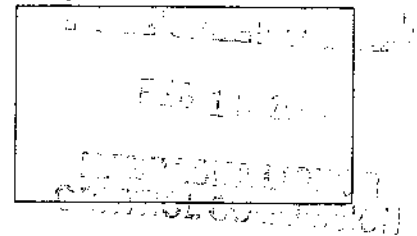
Printed with soy ink on recycled paper

FORM 35-4001
REV. 12/99

3-29-04
3-29-04

11-053784
111

- NEED SPECIAL PERMIT -

I#62495
New**APPLICATION FOR LICENSE**Nebraska Liquor Control Commission
PO Box 95046,
301 Centennial Mall South
Lincoln, NE 68509-5046<http://www.nol.org/home/NLCC/>
Phone: (402) 471-2571
Fax: (402) 471-2814

INSTRUCTIONS: Include: 1. Applicable fees payable to Liquor Control Commission 2. Copy of birth certificate or naturalization papers proving U.S. citizenship for each individual and spouse named on application (not required of corporations or spouse(s) who file an affidavit of no interest with application, Commission form 4178 3. Corporations must include copy of articles of incorporation as filed with the Secretary of States office in the state of Nebraska 4. Commission checklist, form 4251 5. Fingerprint cards and processing fees (are required of individuals, all partners and spouses. Corporate applicants must file for CEO/Manager & stockholders holding over 25% stock 6. All applications must be typewritten or printed clearly 7. Submit in **Triplicate** 8. Required areas marked by a red asterisk (*)

CLASS OF LICENSE FOR WHICH APPLICATION IS MADE AND LIST OF FEES FOR EACH

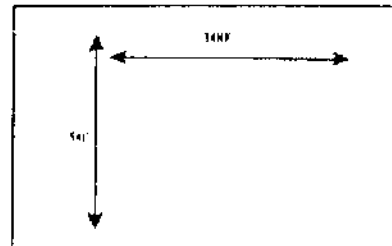
Class of License (Check applicable class) *	Registration Fee	License Fees	Corporate Surety Bond
<input type="checkbox"/> A Beer, On Sale Only - Inside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> F Beer, On Sale Only - Outside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> B Beer, Off Sale Only - Inside/Outside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> J Wine, Beer, On Sale Only - Inside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input checked="" type="checkbox"/> I Spirits, Wine, Beer, On Sale Only - Inside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> D Spirits, Wine, Beer, Off Sale Only - Inside Corporate Limits	\$45.00	\$150.00	exempt
<input type="checkbox"/> D1 Spirits, Wine, Beer, Off Sale Only - within extraterritorial zoning jurisdiction	\$45.00	\$150.00	exempt
<input type="checkbox"/> C Spirits, Wine, Beer On & Off Sale - Inside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> M Bottle Club (Spirits, Wine, Beer, On Sale)	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> H Nonprofit Corporation	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> K Wine Only, Off Sale	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> O Boat	\$45.00	\$50.00	exempt
<input type="checkbox"/> V Manufacturer of Beer, Wine & Distilled Spirits	\$45.00	Varies \$100 to \$1,000	\$10,000 min.
<input type="checkbox"/> X Wholesale Liquor	\$45.00	\$500.00	\$ 5,000 min.
<input type="checkbox"/> W Wholesale Beer	\$45.00	\$250.00	\$ 5,000 min.
<input type="checkbox"/> Y Farm Winery	\$45.00	\$250.00	\$ 1,000 min.
<input type="checkbox"/> L Craft Brewery (Brew Pub)	\$45.00	\$250.00	\$ 1,000 min.

TYPE OF APPLICATION *	CORPORATE SURETY BOND INFORMATION
Type of application being applied for (check appropriate box)	Bond Company - for Classes L V W X Y only
1. <input type="radio"/> Individual License requires Form 1 to be attached.	N/A
2. <input type="radio"/> Partnership License requires Form 2 to be attached.	Start Date
3. <input checked="" type="radio"/> Corporate License requires Forms 3 and Manager Application to be attached	Month/Day/Year
	Bond Number

SECTION A -- LOCATION INFORMATION -- Must be completed by all applicants			
Trade Name (name of business)		Telephone Number at premise to be licensed	
Four Suns Restaurant		402/420-6560	
1) Street Address of Proposed licensed premise		2) Mailing Address for receipt of Liquor Control Commission mailings	
3239 So. 13th Street		3239 So. 13th Street	
City	County	City	County
Lincoln	Lancaster	Lincoln	Lancaster
Zip Code		Zip Code	
68502		68502	

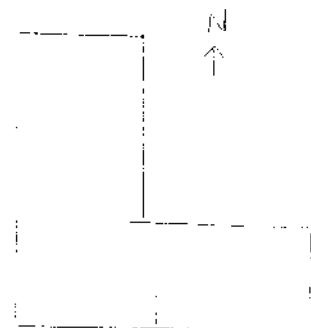
DESCRIPTION AND DIAGRAM OF THE STRUCTURE TO BE LICENSED

In the space provided draw the area to be licensed. This should include storage areas, basement, sales areas and areas where consumption or sales of alcohol will take place. If only a portion of the building is to be covered by the license, you must still include dimensions (length x width) of the licensed area as well as the dimensions of the entire building in situations where only a portion of the entire bldg is to be covered by the license. No blue prints will be accepted. Be sure to indicate the direction North and number of floors of the building.



Example: East portion approximately 50' x 100' of main floor of 3 story building plus basement. Approximately 30' x 50' at the East end.

55' x 72' area located in the middle of the short leg of an L-shaped, one-story building. See attached drawing.



SECTION B			OTHER INFORMATION REQUIRED *	
	Yes	No	Explanation/Comments Note: Only what is visible on screen will be printed	
<p>* 1. READ CAREFULLY. Answer completely and accurately.</p> <p>Has anyone who is a party to this application, or their spouse, ever been convicted of or plead guilty to any criminal charge. Criminal charge means any charge alleging a felony or misdemeanor violation of a federal or state law; or a violation of a local law, ordinance or resolution. Include any DWIs or DULs. List the nature of the charge, where the charge occurred and the year and month of the conviction or plea. Also list any charges pending at the time of this application. If more than one party, please list charges by each individual's name.</p>	Yes <input checked="" type="radio"/>	No <input type="radio"/>	See attached	
<p>* 2. Are you buying the business and/or assets of a licensee? If yes, submit a copy of the sales agreement with a listing of assets being acquired including liquor inventory (name brand and container size required).</p>	Yes <input type="radio"/>	No <input checked="" type="radio"/>		
<p>* 3. Are you filing a temporary agency agreement, Commission form 4231, whereby current licensee allows you to operate on their license? If yes, attach copy.</p>	Yes <input type="radio"/>	No <input checked="" type="radio"/>		
<p>* 4. Are you borrowing any money from any source to establish and/or operate the business? If yes, list the lender.</p>	Yes <input checked="" type="radio"/>	No <input type="radio"/>	Federal Credit Union, Lincoln, NE	
<p>* 5 Will any person or entity other than licensee be entitled to a share of the profits of the establishment? If yes, explain.</p>	Yes <input type="radio"/>	No <input checked="" type="radio"/>		

<p>* 6. Will any of the furniture, fixtures and equipment to be used in this business be owned by others? If yes, list such items and the owner.</p>	<p>Yes <input type="radio"/></p>	<p>No <input checked="" type="radio"/></p>	
<p>* 7. Will any person(s) other than named in this application have any direct or indirect ownership or control of the business? If yes, explain?</p>	<p>Yes <input type="radio"/></p>	<p>No <input checked="" type="radio"/></p>	
<p>* 8. Are the premises to be licensed within 150 ft. of a church, school, hospital, home for the aged or indigent persons or for veterans, their wives, children, or within 300 ft. of a college or university campus? If yes, list the name of such institution and where it is located in relation to the premises. Per Sec. §53-177.</p>	<p>Yes <input type="radio"/></p>	<p>No <input checked="" type="radio"/></p>	
<p>* 9. Is anyone listed on this application a law enforcement officer? If yes, list the person, the law enforcement agency involved and the persons exact duties.</p>	<p>Yes <input type="radio"/></p>	<p>No <input checked="" type="radio"/></p>	
<p>10. List the primary bank and/or financial institution (branch if applicable) to be utilized by the business and the person(s) who will be authorized to write checks and/or make withdrawals on accounts at such institutions.</p>	<p>TierOne Bank, Lincoln, NE Authorized Person = Pimpa Mills</p>		
<p>11. List all past and present liquor licenses held by any person named in this application. Include license holder name, location of license and license number. Also list reasons for termination of any licenses previously held.</p>	<p>None</p>		
<p>12. List the person who will be the on site supervisor of the business and the estimated number of hours per week such person or manager will be on the premises supervising operations.</p>	<p>Pimpa Mills -- 70 hours</p>		

13. List the training and experience of the person listed in #12 above in connection with selling and/or serving alcohol products.	Bartender in Commerce City, CO 1990-1992		
14. If the property for which this license is sought is owned, submit a copy of the deed, or proof of ownership, if leased submit a copy of the lease covering the entire license year. (Documents must show title or lease held interest in name of applicant as owner or lessee in the individual(s) or corporate name for which the application is being filed)	Copy attached		
15. When do you intend to open for business?	Currently open		
16. List the principal residence for the past 10 years for all persons required to sign application. If necessary attach a separate sheet.			
NAME	FROM (YEAR)	TO (YEAR)	RESIDENCE (CITY, STATE)
Pimpa Mills	1993	2004	Lincoln, NE
Mark Mills	1993	2004	Lincoln, NE
Richard Babcock	1993	2000	Hallam, NE
Richard Babcock	2000	2003	Lincoln, NE
Richard Babcock	2003	2004	Milford, NE

The undersigned applicant(s) hereby consent(s) to a background investigation and release of present & future records of every kind and description including police records, tax records (State and Federal), bank or lending institution records, and said applicant(s) and spouse(s) waive(s) any right or causes of action that said applicant(s) or spouse(s) may have against the Nebraska Liquor Control Commission, the Nebraska State Patrol, and any other individual disclosing or releasing said information. Any documents or records for the proposed business or for any partner or stockholder that are needed in furtherance of the application investigation or any other investigation shall be supplied immediately upon demand to the Nebraska Liquor Control Commission or the Nebraska State Patrol. The undersigned understand and acknowledge that any license issued, based on the information submitted in this application, is subject to cancellation if the information contained herein is incomplete and/or inaccurate.

Individual applicants agree to supervise in person the management and operation of the business and that they will operate the business authorized by the license for themselves and not as an agent for any other person or entity. Corporate applicants agree the approved manager will superintend in person the management and operation of the business. Partnership applicants agree one partner shall superintend the management and operation of the business. All applicants agree to operate the licensed business within all applicable laws, rules, regulations, and ordinances and to cooperate fully with any authorized agent of the Nebraska Liquor Control Commission.

Must be signed in the presence of a notary public. Must be signed by applicant and spouse; if a partnership, all partners and spouses must sign and corporation, all stockholders (holding more than 25% of the stock), officers, directors and spouses must sign. Full names only, initials not acceptable.

Sign here Pampa Mills

Sign Here Mark D. Hill

Sign Here Richard Babcock

Sign Here _____

Sign Here _____

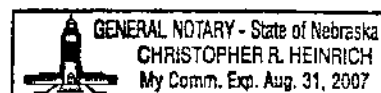
Sign Here _____

Sign Here _____

Sign Here _____

Subscribed in my presence and sworn to before me this 3 day of Feb., 2004

(SEAL)



In compliance with ADA, this application for license form is available in other formats for persons with disabilities. A ten day advance period is requested in writing to produce the alternative format.

Sign here Christopher R. Heinrich
Notary Public Signature

Verify & Print form

FORM 35-4010

1

REV 1/01

Application for License – Section B, Question 1
Application for Corporate Manager – Question 1

RECEIVED
FEB 17 2011
NEBRASKA DEPT OF
CORRECTIONS

Mark Mills

- Approximately 1998 – Speeding – Lancaster County, Nebraska – He either paid a fine or took a STOP Class (cannot remember which)
- Approximately 2003 – Ticketed for failure to stop – Lancaster County, Nebraska – dismissed by City Attorney

Richard Babcock

- 2003 – Speeding ticket – paid fine

72'

45'6"

26'6"

Private Party
Room

Dining

Restrooms

Office/Dry
Goods

Dishwashing/Food
Storage
Beer/Wine Storage

Food Prep

Kitchen

Waiting
Area

Entry

LOCKED

PLP 10/20

RECEIVED BY
CONTINGENT

N
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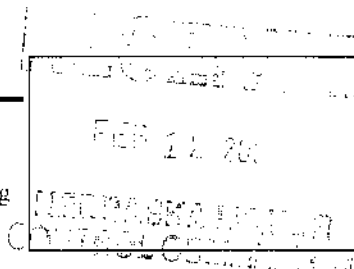
Corporation/LLC Application for License - Form 3

Nebraska Liquor Control Commission

INSTRUCTIONS:

- 1) Application and application for manager must be typewritten and submitted in triplicate
- 2) Fingerprint cards (2 cards per person) must be submitted for: **a)** each stockholder owning over 25% of the stock, **b)** chief executive officer, **c)** proposed manager and **d)** all spouses
- 3) Information regarding spouses must be completed

Required areas marked by a red asterisk (*)

Name of Corporation That Will Hold License. **Attach copy of Articles of Incorporation**

Total Number of Shares (if corporation)

Four Suns Restaurant, Inc. *

10,000 *

Corporate Street Address

3239 So. 13th Street *

Mailing address for receipt of Liquor Control Commission Mailings

3239 So. 13th Street *

Corporate Telephone Number

402/420-6560 *

City

Lincoln *

County

Lancaster *

State

NE *

Zip Code

68502 * -

Name of Registered Agent

Christopher R. Heinrich *

Name of Proposed Manager

Pimpa Mills *

IN THIS SECTION LIST THE NAME OF THE CHIEF EXECUTIVE OFFICER

Name

Pimpa Mills *

Title

President *

Date of Birth

[REDACTED] *

Social Security Number

[REDACTED] *

Home Address (1)

2101 So. Cotner Blvd. *

City

Lincoln *

State

NE *

Zip Code

68506 * -

Home Telephone Number

402/327-8044 *

PRINCIPLE OFFICERS, DIRECTORS, STOCKHOLDERS, MEMBERS AND SPOUSESName of Officers, Directors, Members and Spouses.
Give Last Name, First Name, Middle, Maiden, and any aliases

Social Security Number

Date of Birth

Title

Name

Mills, Pimpa (Maneesan)

[REDACTED]

[REDACTED]

Pres. Sec. Treas. Dir.

Spouse Name

Mills, Mark Daniel

[REDACTED]

[REDACTED]

N/A

Partner Number of Shares / %

100

Spouse Number of Shares / %

0

Name of Officers, Directors, Members and Spouses.

Give Last Name, First Name, Middle, Maiden, and any aliases	Social Security Number	Date of Birth	Title
Name Babcock, Richard Leeland	[REDACTED]	[REDACTED]	Vice Pres.
Spouse Name N/A			
Partner Number of Shares / % 0	Spouse Number of Shares / % N/A		

Name of Officers, Directors, Members and Spouses. Give Last Name, First Name, Middle, Maiden, and any aliases	Social Security Number	Date of Birth	Title
Name			
Spouse Name			
Partner Number of Shares / %	Spouse Number of Shares / %		

Name of Officers, Directors, Members and Spouses. Give Last Name, First Name, Middle, Maiden, and any aliases	Social Security Number	Date of Birth	Title
Name			
Spouse Name			
Partner Number of Shares / %	Spouse Number of Shares / %		

Name of Officers, Directors, Members and Spouses. Give Last Name, First Name, Middle, Maiden, and any aliases	Social Security Number	Date of Birth	Title
Name			
Spouse Name			
Partner Number of Shares / %	Spouse Number of Shares / %		

(If Necessary, Continue on Separate Sheet)

Is this Corporation/LLC controlled by another Corporation?

Yes ☐ No ☒

Name of control Corporation _____

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FEB 11 2004

NEBRASKA
CONTROL CORPORATION

IF YES, LIST EACH STOCKHOLDER/MEMBER OWNING MORE THAN 25% stock/interest in that corporation/LCC. Any applicant who has a Corporation as a shareholder MUST file an organizational chart listing all shareholders and/or corporations owning more than 25% stock and listing of the percentage of stock owned.

Please indicate below your corporate tax year with the IRS

Starting date: January 1 Ending date: December 31

State of Nebraska

)

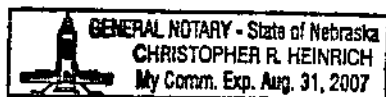
) ss.

Lancaster County

)

Christopher R. Heinrich

Notary Public Signature & Seal



By

Pampa Mills

President/Member

In Compliance with ADA, this form is available in other formats for persons with disabilities. A ten day advance period is requested in writing to produce the alternate format.

Pampa Mills

Secretary/Member

Verify Form and Print

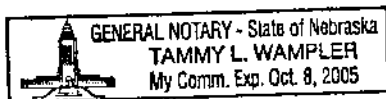
FORM 35-4183
REV. 02/01

NEBRASKA LIQUOR CONTROL COMMISSION
AFFIDAVIT OF NON PARTICIPATION

The undersigned individual acknowledges that he/she will have no interest, directly or indirectly, in the operation or profit of the business, as prescribed in Section §53.125(13) of the Liquor Control Act. Such individual shall not tend bar, make sales, serve patrons, stock shelves, write checks, sign invoices, represent themselves as owner or in any way participate in the day to day operations in any capacity. Undersigned will also be waived of filing fingerprint cards, however, has disclosed any violation(s) on the application.

Mark D Miller
Signature of Spouse

SUBSCRIBED in my presence and sworn to before me this 4th day of February, A.D. 2004.



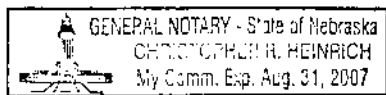
Tammy L Wampler
Signature of Notary Public

The licensee/applicant understands that he/she is responsible for compliance with the conditions set out above, and that if such terms are violated, the Commission may cancel or revoke the license.

Pimpa Mills
Signature of Licensee/Applicant

Four Suns Restaurant, Inc.
By: Pimpa Mills, Pres.
Print Name of Licensee/Applicant

SUBSCRIBED in my presence and sworn to before me this 3 day of Feb., A.D., 2004.



Christopher R Heinrich
Signature of Notary Public

FORM 35-4178
REV 2/01

Application for Corporate Manager***Must Be A Nebraska Resident*****Please submit in Triplicate****Return to: Nebraska Liquor Control Commission, PO Box 95046
301 Centennial Mall So., Lincoln NE 68509****Phone: (402) 471-2571****Fax: (402) 471-2814****Web address: <http://www.nol.org/home/NLCC/>**

Required areas marked by a red asterisk (*)

LIQUOR LICENSE INFORMATION

Name of Licensed Corporation

Four Suns Restaurant, Inc. *

Class & License number

Class I -- Applied for *

Trade Name of Licensed Premise

Four Suns Restaurant *

Street Address of Licensed Premise

3239 So. 13th Street *

City

Lincoln *

County

Lancaster *

On behalf of the corporation, I designate this individual as corporate manager.

Signature of Corporate President/CEO:

*Pimpa Mills***APPLICANT INFORMATION (MUST BE 21 OR OVER)**

Full Name (Last, First, Middle, Maiden)

Mills, Pimpa (Maneesan) *

Sex *

F

M

Social Security Number

[REDACTED] *

Date of Birth

[REDACTED] *

Place of Birth

Thailand, Phagreen Brurry *

Home Street Address

2101 So. Cotner Blvd. *

City

Lincoln *

County

Lancaster *

State

NE *

Zip Code

68506 *

Home Telephone Number

402/327-8044 *

Business Telephone Number

402/420-6560 *

Drivers License Number

[REDACTED] *

State

NE *

Are You Married? * Yes ☒ No ☐ If Yes, You must complete the following:

SPOUSE'S INFORMATION (IF NOT MARRIED INDICATE)

Full Name (Last, First, Middle, Maiden)

Mills, Mark Daniel

Social Security Number

508-78-9319

Drivers License Number

[REDACTED]

State

NE

Date of Birth

3/17/57

Place of Birth

Lincoln, NE

*** 1. READ CAREFULLY.** Answer completely and accurately.

Has anyone who is a party to this application, or their spouse, ever been convicted of or plead guilty to any criminal charge. Criminal charge means any charge alleging a felony or misdemeanor violation of a federal or state law; or a violation of a local law, ordinance or resolution. List the nature of the charge, where the charge occurred and the year and month of the conviction or plea. Also list any charges pending at the time of this application. If more than one party, please list charges by each individual's name.

Yes No

☒☐

See attached

*** 2.** Have you or your spouse ever made application for any liquor license or manager for any liquor license? IF YES, for what premise give license number and date.

Yes No

☐☒*** 3.** Have you or your spouse ever made a compromise settlement for violation of such laws?

Yes No

☐☒*** 4.** Do you, as a manager, have all the qualifications required by any person entitled to hold a Nebraska Liquor License?

Nebraska Liquor Control Act (§53-131.01)

Yes No

☒☐*** 5.** Have you filed fingerprint cards and **PROPER FEES** (if check, make out to the NE State Patrol), with this application?

Yes No

☒☐

RESIDENCES SINCE AGE 18, APPLICANT AND SPOUSE MUST COMPLETE

	Year	
	From	To
Applicant: City & State		
Bankcok, Thailand	1970	1972
Spouse: City & State		
Lincoln, NE	1975	1977

	Year	
	From	To
Applicant: City & State		
Greeley, CO	1972	1975
Spouse: City & State		
Denver, CO	1977	1993

	Year	
	From	To
Applicant: City & State		
Denver, CO	1975	1993
Spouse: City & State		
Lincoln, NE	1993	now

	Year	
	From	To
Applicant: City & State		
Lincoln, NE	1993	now
Spouse: City & State		

EMPLOYERS - LIST LAST TWO EMPLOYERS

	Year	
	From	To
Name of Employer		
Four Suns Restaurant	1993	2004
Name of Supervisor	Telephone Number	
Applicant	402/420-6560	

	Year	
	From	To
Name of Employer		
Chawpraya Thai Restaurant	1990	1993
Name of Supervisor	Telephone Number	
Nita	Unknown	

PERSONAL OATH AND CONSENT OF INVESTIGATION - MUST BE SIGNED BY

APPLICANT & SPOUSE

RECEIVED

STATE OF NEBRASKA)

) SS

COUNTY OF Lancaster)

FEB 12 2004

NEBRASKA LIQUOR
CONTROL COMMISSION

The above individual(s), being first duly sworn upon oath, deposes and states that the undersigned is the applicant and/or spouse of applicant who makes the above and foregoing application, that said application has been read and that the contents thereof and all statements contained therein are true. If any false statement is made in any part of this application, the applicant(s) shall be deemed guilty of perjury and subject to penalties provided by law. (Sec. §53-131.01) Nebraska Liquor Control Act.

The undersigned applicant hereby consents to an investigation of his/her background including all records of every kind and description including police records, tax records (State and Federal), and bank or lending institution records, and said applicant and spouse waive any rights or causes of action that said applicant or spouse may have against the Nebraska Liquor Control Commission and any other individual disclosing or releasing said information to the Nebraska Liquor Control Commission. If spouse has **NO** interest directly or indirectly, an affidavit may be attached, however, fingerprint cards are still required to be filed.

The undersigned understand and acknowledge that any license issued, based on the information submitted in this application, is subject to cancellation if the information contained herein is incomplete and inaccurate.

Rempa Mills

Signature of Applicant

[Signature]

Signature of Spouse (if applicable)

Subscribed in my presence and sworn to before me this
3 day of Feb, 2004.

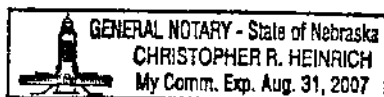
Subscribed in my presence and sworn to before me this
4th day of February, 2004

Christopher R. Heinrich

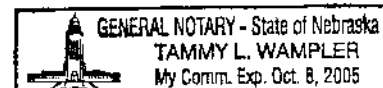
Notary Signature & Seal

Tammy L. Wampler

Notary Signature & Seal



Verify and Print



FORM 35-4013
REV. 2/01

[illegible]

- Approximately 1998 – Speeding – Lancaster County, Nebraska – He either paid a fine or took a STOP Class (cannot remember which)
- Approximately 2003 – Ticketed for failure to stop – Lancaster County, Nebraska – dismissed by City Attorney

- 2003 – Speeding ticket – paid fine